Fee Schedule

Prefix 4 - Audiology Procedures Only

Healthcare and Family Services Updated as of: 9/12/2006

	, tadio	ogy : 10000aa100 01)		Hand	Program
Prefix	HCPCS	Description	Rate	Priced?	Code
4	92506	EVAL OF SPEECH, LANG, VOICE, COMMUNICATION, AUD PROCESSING	37.40	N	04
4	92507	TREATMENT OF SPEECH, LANG, VOICE, COMM, AND/OR AUD PRO DIS	19.80	N	04
4	92510	AURAL REHAB AFTER COCHLEAR IMPLANT	49.30	N	04
4	92551	PURE TONE HEARING TEST, AIR	15.20	N	04
4	92552	PURE TONE AUDIOMETRY, AIR	15.20	N	04
4	92553	AUDIOMETRY, AIR & BONE	15.20	N	04
4	92555	SPEECH THRESHOLD AUDIOMETRY	15.20	N	04
4	92556	SPEECH AUDIOMETRY, COMPLETE	15.20	N	04
4	92557	COMPREHENSIVE AUDIOMETRY	37.40	N	04
4	92563	TONE DECAY HEARING TEST	15.20	N	04
4	92564	SISI HEARING TEST	15.20	N	04
4	92565	STENGER TEST, PURE TONE	15.20	N	04
4	92567	TYMPANOMETRY	15.20	N	04
4	92568	ACOUSTIC REFLEX TESTING	13.70	N	04
4	92569	ACOUSTIC REFLEX DECAY TEST	14.68	N	04
4	92577	STENGER TEST, SPEECH	12.20	Ν	04
4	92579	VISUAL REINFORCEMENT AUDIOMETRY (VRA)	22.15	N	04
4	92582	CONDITIONING PLAY AUDIOMETRY	22.15	N	04
4	92583	SELECT PICTURE AUDIOMETRY	15.15	N	04
4	92584	ELECTROCOCHLEOGRAPHY	74.90	N	04
4	92585	BRAINSTEM EVOKED RESPONSE REC	53.70	N	04
4	92586	AUDITORY EVOKED POTENTIALS COMPREHENSIVE, LIMITED	40.86	N	04
4	92587	EVOKED OTOACOUSTIC EMISSIONS; LIMITED	52.70	N	04
4	92588	EVOKED OTOACOUSTIC EMISSIONS, COMPR/DIAG EVALUATION	61.00	N	04
4	92590	HEARING EXAM, MONAURAL	37.40	N	04
4	92591	HEARING EXAM, BINAURAL	37.40	N	04
4	92594	ELECTROACOUSTIC MONAURAL	15.20	N	04

Procedure Count:

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